



Licensing & Regulation Division
Liquor Control Board
PO Box 43098
Olympia, WA 98504-3098
www.liq.wa.gov
Customer Service Phone: (360) 664-1600
Fax Number: (360) 753-2710

ALTERATION REQUEST FORM

Alteration requests must be accompanied by 2 sets of floor plans to include the following information:

1. Drawn ¼ inch to 1 foot scale
2. North arrow indicator
3. Location of all public entrances (must designate access such as street, alley, parking lot, and list street names)
4. Name of rooms (dining areas, lounge, tap room, game room, dance floor, bandstand, etc.)
5. Furniture (tables, chairs, booths, bar, service bars, pool tables, dart boards, etc.)
6. Outdoor service areas (patio, deck, beer garden, etc.)

Licensee information: (To be filled out by licensee)

Liquor License Number: _____

Tradename: _____ City: _____

Contact Person: _____ Phone No. _____

Alteration information: (To be filled out by licensee)

Describe the alteration: (attach additional sheets of paper if needed)

Signature _____ Date: _____
(Licensee or Representative)